 

**Cross Connection Program**

# Application for Extension of Time for Installation of Containment Assembly

**Office Use Only**

☐Initial Due Date / /20

☐Extension Granted

Due Date / /20

☐Extension Denied

**Supporting Documentation:**

* Sheet 1A for metered services

☐Three bids

* Proof of Hazards Protected

# Property Owner Information as listed in Wake County Real Estate Records:

Address:

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NC Zip Code: ­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PIN:

1. Services for which an extension of time for installation of containment assemblies is requested:
   * Domestic/Irrigation Services (Please submit Form1A)
   * Fire Service Line
   * Private Distribution Line
2. Please submit three bids detailing scope and cost of work for required containment assemblies.
3. Date of completion:

(Completion date not to exceed 275 days from initial due date)

1. Please submit proof that all severe hazards identified on the Backflow Assessment Form are protected by a containment or isolation assembly

**Owner**

I hereby state that the Property Owner listed above is the owner of the property located at the address above and that the Owner agrees to indemnify to the fullest extent permitted by law, the City of Raleigh, the City of Raleigh Public Utilities and Cross Connection Control Program (hereinafter collectively called “the City”) and their respective officers, representatives, agencies, contractors, servants and employees from and against any and all claims, suits actions, proceedings and losses (“claims and losses”) that may arise from this request, including the failure to install a containment assembly. I understand that falsification of any statement is considered a willful violation which could result in civil penalties and fines. During this time of extension, if the building’s use changes, I will insure submittal of a new application that reflects the new use.

( ) -

Name of Property Owner Phone

Address

City

State

Zip Code

Printed Name and Signature of Owner or Legally Authorized Representative\*

Date

\*Authorized corporate officer (if corporation), member (if LLC) or general partner (if partnership) for the Property

Office: 919-996-3245

(option 4 then 2)

Fax: 919-996-1868

[cross.connection@raleighnc.gov](mailto:cross.connection@raleighnc.gov) Go to [www.raleighnc.gov](http://www.raleighnc.gov/) Search “Cross Connection”

Form 1A Metered Services

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Meter #\*** | **Service Address\*** | **Office Use** Assessment Form Submitted | **Office Use** Containment or Isolation Protection Needed for Extension | **Office Use** Backflow Verification Form Submitted |
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